

the funeral of Kyle Milliken. Had I been present, I would have voted “yea” on rollcall No. 302, “yea” on rollcall No. 303, and “yea” on rollcall No. 304.

VERIFY FIRST ACT

Mr. BRADY of Texas. Mr. Speaker, pursuant to House Resolution 378, I call up the bill (H.R. 2581) to amend the Internal Revenue Code of 1986 to require the provision of social security numbers as a condition of receiving the health insurance premium tax credit, and ask for its immediate consideration.

The Clerk read the title of the bill.

The SPEAKER pro tempore (Mr. MITCHELL). Pursuant to House Resolution 378, the amendment in the nature of a substitute recommended by the Committee on Ways and Means, printed in the bill, shall be considered as adopted, and the bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 2581

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Verify First Act”.

SEC. 2. VERIFICATION OF STATUS IN UNITED STATES AS CONDITION OF RECEIVING ADVANCE PAYMENT OF HEALTH INSURANCE PREMIUM TAX CREDIT.

(a) APPLICATION TO CURRENT HEALTH INSURANCE PREMIUM TAX CREDIT.—Section 36B of the Internal Revenue Code of 1986, as in effect for months beginning before January 1, 2020, is amended by redesignating subsection (g) as subsection (h) and by inserting after subsection (f) the following new subsection:

“(g) VERIFICATION OF STATUS IN UNITED STATES FOR ADVANCE PAYMENT.—No advance payment of the credit allowed under this section with respect to any premium under subsection (b)(2)(A) with respect to any individual shall be made under section 1412 of the Patient Protection and Affordable Care Act unless the Secretary has received confirmation from the Secretary of Health and Human Services that the Commissioner of Social Security or the Secretary of Homeland Security has verified under section 1411(c)(2) of such Act the individual’s status as a citizen or national of the United States or an alien lawfully present in the United States using a process that includes the appropriate use of information related to citizenship or immigration status, such as social security account numbers (but not individual taxpayer identification numbers).”.

(b) APPLICATION TO NEW HEALTH INSURANCE PREMIUM TAX CREDIT.—Section 36B of the Internal Revenue Code of 1986, as amended by the American Health Care Act of 2017 and in effect for months beginning after December 31, 2019, is amended by adding at the end the following new subsection:

“(h) VERIFICATION OF STATUS IN UNITED STATES FOR ADVANCE PAYMENT.—No advance payment of the credit allowed under this section with respect to any amount under subparagraph (A) or (B) of subsection (b)(1) with respect to any individual shall be made under section 1412 of the Patient Protection and Affordable Care Act unless the Secretary has received confirmation from the Secretary of Health and Human Services that the Commissioner of Social Security or the Secretary of Homeland Security has verified under section 1411(c)(2) of such Act the

individual’s status as a citizen or national of the United States or a qualified alien (within the meaning of section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (8 U.S.C. 1641)) using a process that includes the appropriate use of information related to citizenship or immigration status, such as social security account numbers (but not individual taxpayer identification numbers).”.

(c) CONFORMING AMENDMENT ON CONTINUOUS HEALTH INSURANCE COVERAGE PROVISION.—Section 2710A(b)(1) of the Public Health Service Act, as added by section 133 of the American Health Care Act of 2017, is amended by adding after subparagraph (C) the following:

“In the case of an individual who applies for advance payment of a credit under section 1412 of the Patient Protection and Affordable Care Act and for whom a determination of eligibility for such advance payment is delayed by reason of the requirement for verification of the individual’s status in the United States under section 1411(c)(2) of such Act, the period of days beginning with the date of application for advance payment and ending with the date of such verification shall not be taken into account in applying subparagraph (B). The Secretary shall establish a procedure by which information relating to this period is provided to the individual.”.

(d) DELAY PERMITTED IN COVERAGE DATE IN CASE OF DELAY IN VERIFICATION OF STATUS FOR INDIVIDUALS APPLYING FOR ADVANCE PAYMENT OF CREDIT.—Section 1411(e) of the Patient Protection and Affordable Care Act (42 U.S.C. 18081(e)) is amended—

(1) in paragraph (3), by inserting after “applicant’s eligibility” the following: “(other than eligibility for advance payment of a credit under section 1412)”; and

(2) by adding at the end the following new paragraph:

“(5) DELAY PERMITTED IN COVERAGE DATE IN CASE OF DELAY IN VERIFICATION OF STATUS FOR INDIVIDUALS APPLYING FOR ADVANCE PAYMENT OF CREDIT.—In the case of an individual whose eligibility for advance payments is delayed by reason of the requirement for verification under subsection (c)(2), if, for coverage to be effective as of the date requested in the individual’s application for enrollment, the individual would (but for this paragraph) be required to pay 2 or more months of retroactive premiums, the individual shall be provided the option to elect to postpone the effective date of coverage to the date that is not more than 1 month later than the date requested in the individual’s application for enrollment.”.

(e) EFFECTIVE DATES.—

(1) APPLICATION TO CURRENT HEALTH INSURANCE PREMIUM TAX CREDIT.—The amendment made by subsection (a) is contingent upon the enactment of the American Health Care Act of 2017 and shall apply (if at all) to months beginning after December 31, 2017.

(2) APPLICATION TO NEW HEALTH INSURANCE PREMIUM TAX CREDIT.—The amendment made by subsection (b) is contingent upon the enactment of the American Health Care Act of 2017 and shall apply (if at all) to months beginning after December 31, 2019, in taxable years ending after such date.

(3) CONFORMING AMENDMENT ON CONTINUOUS HEALTH INSURANCE COVERAGE PROVISION.—The amendment made by subsection (c) is contingent upon the enactment of the American Health Care Act of 2017 and shall take effect (if at all) as if included in such Act.

(4) FLEXIBILITY IN COVERAGE DATE IN CASE OF DELAY IN VERIFICATION OF STATUS.—The amendment made by subsection (d) is contingent upon the enactment of the American Health Care Act of 2017 and shall apply (if at all) to applications for advance payments for months beginning after December 31, 2017.

The SPEAKER pro tempore. The gentleman from Texas (Mr. BRADY) and

the gentlewoman from California (Ms. SÁNCHEZ) each will control 30 minutes.

The Chair recognizes the gentleman from Texas.

GENERAL LEAVE

Mr. BRADY of Texas. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on the bill currently under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. BRADY of Texas. Mr. Speaker, I yield myself as much time as I may consume.

Last month House Republicans took a significant step to return patient-centered healthcare to the American people. We passed the American Health Care Act. The American Health Care Act begins our step-by-step process to repeal ObamaCare and replace this collapsing law with a 21st century healthcare system that truly works for American families, job creators, our States, and our taxpayers.

Now, as work on the American Health Care Act moves forward in the Senate, we are moving forward on a parallel track to deliver more solutions for the American people. One of those is the Verify First Act, sponsored by Congressman LOU BARLETTA of Pennsylvania.

This legislation takes important action to protect taxpayer dollars from waste, fraud, and abuse. It prevents the American Health Care Act’s monthly tax credits and ObamaCare’s current subsidies from being dispensed until the legal status of an eligible recipient can be verified.

Under ObamaCare, people who are in the United States illegally are prohibited from receiving taxpayer-funded subsidies to help purchase health insurance; but like so many aspects of ObamaCare, there is a major defect. ObamaCare starts by assuming a person is a legal resident and sends the money right away even if the verification process is still incomplete.

As we have seen with so many Federal programs, it is all but impossible to get fraudulently claimed money back after it is already out the door. This flaw of ObamaCare is no different. It has resulted in taxpayer-funded subsidies being spent on people who are not in the United States legally and, therefore, not eligible to receive them.

My constituents in Texas and yours around the country work too hard to see their tax dollars wasted by Washington’s carelessness. The best solution to protect taxpayer dollars from waste, fraud, and abuse is to stop it before it occurs, and that is what the Verify First Act by Mr. BARLETTA will do.

This bill strengthens existing verification tools by making a commonsense change. Rather than sending the money first and confirming legal status later, it verifies legal status up

front. So if you want to receive financial support for health insurance, this bill simply requires that you first provide a Social Security number or another form of acceptable information to validate citizenship or immigration status.

This commonsense change will apply to ObamaCare beginning with next year's open enrollment period, and after ObamaCare is repealed, it will apply to the tax credits offered in the American Health Care Act when they take effect. This helps ensure that taxpayer-funded assistance for the purchase of health insurance is only distributed to people who are eligible, not to those who are in our country illegally.

I want to thank Congressman BARLETTA for his leadership on this important legislation. The Verify First Act is a much-needed solution to safeguard taxpayer dollars from waste, fraud, and abuse both now and in the future, and that is crucial as we continue our efforts to repeal and replace the failing ObamaCare law. It is vital to improving America's health system for the long term.

I urge all my colleagues to join me in supporting the passage of the Verify First Act, and I reserve the balance of my time.

Ms. SÁNCHEZ. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I can't believe we are here today attempting to pass such a blatantly discriminatory bill. Under the guise of fighting fraud, Republicans are attempting to pass a bill that will put additional barriers to care for all Americans—all this in exchange for one Member's vote for TrumpCare, which guts healthcare for 23 million Americans, and the Republicans barely passed that bill out of the House.

This bill fails to recognize the diversity of American families; instead, it forces a single approach for all those who need financial help to get the care that they need.

I don't know if everyone on the other side of the aisle knows this, but there are already measures in place to prevent advanced premium tax credits from going to ineligible people. There is already a mechanism in place for Treasury to reconcile tax credits, and any undocumented individual found to have received a subsidy must repay them in full.

The other side will also try to make the argument that this measure will help fight fraud in the healthcare system, that there is somehow overwhelming amounts of evidence that immigrants are the main perpetrators of fraud. Beneficiaries struggling to access care are not the perpetrators of fraud. These are good people trying to do right by their families and by their country.

Of course, my colleagues over there are going to cite a Senate Committee on Homeland Security and Governmental Affairs report, written by a Republican majority, that found, "a half

a million illegal immigrants received \$750 million in healthcare subsidies."

Well, I have that report right here in my hand, and nowhere does it say that 500,000 undocumented immigrants received millions of dollars in healthcare subsidies, as Mr. BARLETTA's press release claims. What the report says is 500,000 individuals, and not 500,000 undocumented individuals or any other term that Republicans like to use to disparage immigrants.

□ 1345

There is no evidence to suggest that immigrants without authorization to be here would take the risk of signing on to a government website to fraudulently get healthcare coverage.

So what are the unintended consequences of this bill?

I hate to break it to my colleagues, but the people most impacted are U.S. citizens who were born abroad or naturalized, not undocumented individuals.

This bill is yet another example that the Republican majority will do anything to demonize even the smallest subsection of immigrants in order to gut healthcare for Americans and get their billionaire buddies a big, fat tax break. Whether that means sowing fear in communities by raiding homes in order to hunt people down or denying access to care for legal immigrants who are entitled to care, no excuse is too ridiculous for Republicans to attack the immigrant community.

Mr. Speaker, I include in the RECORD a letter signed by 226 organizations in opposition to H.R. 2581.

JUNE 12, 2017.

DEAR MEMBER OF CONGRESS: As national, state, and local organizations concerned about immigrant rights or access to affordable health care, we are writing to strongly urge you to VOTE NO on HR 2581, the "Verify First" Act. This bill is an attack on people's ability to see a doctor and on immigrants and people of color. It is not the "common sense" taxpayer protection bill that its supporters would have you believe.

HR 2581 is a dangerous bill that puts up roadblocks for both citizens and immigrants to obtain timely, affordable health insurance. It would strip away provisions that provide for a person to obtain subsidies for enrollment in an Affordable Care Act (or the contemplated American Health Care Act) plan while they work with Department of Health and Human Services to verify their U.S. citizenship or immigration status. The people most impacted are U.S. citizens who were born abroad or naturalized. The bill also affects many immigrants, especially those newly arrived or certain victims of domestic violence and trafficking survivors.

The fact is that when individuals are not able to immediately verify their citizenship or immigration status on an Affordable Care Act Marketplace, it begins an often months long, strenuous process of sending in documents that must be physically inspected. Health care assistants routinely say these clients are the hardest cases they work on because the process for verifying citizenship and immigration status is a time-consuming exercise in dealing with inefficient government processes.

Rather than protect American taxpayers, HR 2581 would strip from American taxpayers important protections that are need-

ed to overcome deficiencies in federal government databases. Immigrants who are not lawfully present are categorically barred from enrollment in health insurance on the Affordable Care Act marketplaces, and for the subsidies that make that insurance affordable. Moreover, safeguards protecting taxpayers are already built into the ACA; individuals whose citizenship or immigration status cannot be verified already are required to pay back all of their subsidies when they file their taxes and "reconcile" their premium tax credits.

Supporters of this bill cite a sloppy Senate Homeland Security and Governmental Affairs Committee report that arrived at a made-up number of supposed "fraud." It's just not true. The committee assumed that every person who lost coverage for failure to verify their citizenship and immigration status was undocumented. In the experience of our organizations and organizations we work with, this is false. These reports describe the first year of the marketplaces, and it is well documented that system outages and understaffing, among other technical problems, contributed to the federal Marketplace's failure to verify consumers' status promptly. The Department of Health and Human Services Inspector General reported in 2014 that a cause of the delay in verification was the agency's lack of prioritization of this issue.

Despite huge gains since then, problems still persist. The Social Security database holding many citizens' information may not reflect common changes, such as when a person marries and changes their last name, or when someone naturalizes and gains U.S. citizenship. People lose their coverage because they receive notices in languages they cannot read. Immigrants are required to submit documents multiple times, or wait while the Department of Homeland Security finds paper files, a result of deficiencies in their databases affecting groups like asylum applicants and some survivors of domestic violence. These are among the many issues consumers face.

Congress has already deprived undocumented immigrants from the ability to buy coverage, even at full price, so they can see a doctor when they are sick, but this bill would go a step further to delay or put out of reach affordable health insurance for many citizens and lawfully present immigrants. Our organizations firmly believe that this would be detrimental to the people we represent and to all of our communities as a whole. We have seen that when health insurance is unaffordable, people are effectively prevented from obtaining access to the care they need to be healthy.

This bill is not just an attack on our health care system, it is also an attack on immigrants and people of color, which our organizations stand firmly against. In his statements when introducing this bill, Rep. Lou Barletta focused the bill as part of his effort to "stop illegal immigration." Rep. Barletta has a long history of anti-immigrant rhetoric, from trying to prevent immigrants from leasing a residence to stating that they should be denied life-saving services in hospital emergency rooms. This bill is simply a vehicle for scapegoating immigrants and people of color and will keep eligible people from accessing health care.

We the undersigned organizations urge you to vote NO on HR 2581 and the continued assault on immigrants and the health of our communities.

Sincerely,

NATIONAL

Advocates for Youth; African American Ministers In Action; American Federation of Teachers (AFT); American Friends Service

Committee; American Intercession; American Society on Aging; Asian & Pacific Islander American Health Forum; Asian Americans Advancing Justice/AAJC; Asian Pacific Institute on Gender-Based Violence; Asian Pacific Partners for Empowerment, Advocacy & Leadership (APPEAL); Association of Asian Pacific Community Health Organizations (AAPCHO); Autistic Self Advocacy Network; Black Alliance for Just Immigration; Breast Cancer Action; Center for Law and Social Policy (CLASP); Center for Medicare Advocacy, Inc.; Child Welfare League of America; Children's Advocacy Institute; Children's Defense Fund; Church World Service (CWS);

Coalition on Human Needs; Columban Center for Advocacy and Outreach; Congregation of Our Lady of Charity of the Good Shepherd, US Provinces; Conscious Talk Radio; Detention Watch Network; Disability Rights Education and Defense Fund; Dominican Sisters; Dominicans of Sinsinawa; Family Equality Council; Farmworker Justice; First Focus Campaign for Children; Food Research & Action Center; Franciscan Sisters of the Poor IJPC; Friends Committee on National Legislation; Generations Inc.; GLMA: Health Professionals Advancing LGBT Equality; Immigrant Legal Resource Center; Indivisible; Institute of the Sisters of Mercy of the Americas; Interfaith Worker Justice;

Irish Apostolate USA; Jobs With Justice; Justice in Aging; Justice, Peace and Reconciliation Commission, Priests of the Sacred Heart, US Province; Lambda Legal; Leadership Team of the Felician Sisters of North America; League of United Latin American Citizens (LULAC); Medical Mission Sisters; Mi Familia Vota; MomsRising; NAACP; NAPAFAASA; National Advocacy Center of the Sisters of the Good Shepherd; National Asian Pacific American Women's Forum; National Association of County and City Health Officials; National Association of Social Workers; National Black Justice Coalition; National Center for Transgender Equality; National Council of Asian Pacific Americans (NCAPA); National Council of Churches;

National Council of La Raza (NCLR); National Education Association; National Employment Law Project; National Health Law Program; National Hispanic Medical Association; National Immigrant Justice Center; National Immigration Law Center; National Justice for Our Neighbors; National Latina Institute for Reproductive Health; National Network of Abortion Funds; National Organization for Women; National Women's Health Network; Network for Environmental & Economic Responsibility of United Church of Christ; NETWORK Lobby for Catholic Social Justice; NMAC; OCA—Asian Pacific American Advocates; Our Revolution; Peace and Justice Office of the Congregation of Notre Dame; Physicians for Reproductive Health; PICO National;

Planned Parenthood Federation of America; Poor People's Economic Human Rights Campaign; Prevention Institute; Project Inform; Racine Dominicans; Raising Women's Voices for the Health Care We Need; Refuge Ministries; Sargent Shriver National Center on Poverty Law; Service Employees International Union; Sisters of Charity; Sisters of Charity of Nazareth; Sisters of Mercy of the Americas—Institute Justice Team; Southeast Asia Resource Action Center (SEARAC); The Leadership Conference on Civil and Human Rights; United Sikhs; United We Dream; Ursuline Sisters of Tildonk, U.S. Province; We Belong Together; API Wellness;

STATE AND LOCAL

Academy of Medical & Public Health Services; Advocates for Children and Youth; AgeOptions; Almost Home, Inc.; Anti-Hunger

& Nutrition Coalition; Arkansas Advocates for Children and Families; Arlington Partnership for Affordable Housing; Asian Americans Advancing Justice—Los Angeles; Asian Community Alliance—Cincinnati OH; Asian Law Alliance; Asian Services In Action, Inc.; Baltimore Jewish Council; California Health Professional Student Alliance; California Immigrant Policy Center; California Latinas for Reproductive Justice (CLRJ); California OneCare; California Pan-Ethnic Health Network; California Partnership; California Physicians Alliance; CASA;

Center for Southeast Asians; Chicago Hispanic Health Coalition; Child Care Resources of Rockland; Children Now; Children's Defense Fund-CA; Chinatown Service Center; Chinese-American Planning Council; Coalition for Humane Immigrant Rights (CHIRLA); Collaborative Center for Justice; Colorado Center on Law and Policy; Colorado Center on Law and Policy; Columbia Legal Services; Community Health Councils; D. C. Hunger Solutions; DuPage Federation on Human Services Reform; Empower Missouri; Ensuring Opportunity Campaign to End Poverty in Contra Costa; Erie Benedictines for Peace; Esperanza Health Centers; EverThrive Illinois; Farmworker Association of Florida;

Florida Immigrant Coalition (FLIC); Give for a Smile; Greater Kansas City Coalition to End Homelessness; Having Our Say Coalition; Health Access California; Health Care for All-WA; Health Law Advocates; Healthy House Within A MATCH Coalition; Hmong Ohio of Tomorrow; Hunger Action Los Angeles; IHM Sisters, Immaculata, PA; IL Hunger Coalition; Illinois Coalition for Immigrant and Refugee Rights; Indivisible Mountain Home, Idaho; Interfaith Movement for Human Integrity; IRIS—Integrated Refugee & Immigrant Services; Islamic Civic Engagement Project; Jewish Family & Children's Service; Kansas Appleseed; Kentucky Equal Justice Center; Korean Community Services of Metropolitan NY; La Fe Policy Research and Education Center;

La Long-Term Care Ombudsman Program; Legal Council for Health Justice; Legal Services of Southern Piedmont; Maine Consumers for Affordable Health Care; Make the Road New York; Maryland CASH Campaign; Maryland Hunger Solutions; Massachusetts Immigrant and Refugee Advocacy Coalition (MIRA); Massachusetts Law Reform Institute; Maternal and Child Health Access; Maternity Care Coalition; National Association of Social Workers, CT Chapter; National Tongan American Society; Nationalities Service Center; NC Child; New Mexico Center on Law and Poverty; New York Immigration Coalition; New York Legal Assistance Group; NICOS Chinese Health Coalition; NJ State Industrial Union Council; NOELA Community Health Center; Northern NJ Chapter, National Organization for Women;

Northwest Health Law Advocates; Northwest Immigrant Rights Project; Office of the Health Care Advocate at Vermont Legal Aid; OneAmerica; Pacific Islander Health Partnership; Pitkin County Human Services; Public Justice Center; Puget Sound Advocates for Retirement Action (PSARA); Rainbow Center; Reformed Church of Highland Park; RESULTS-Santa Fe (NM); Salaam Cleveland; Services, Immigrant Rights, and Education Network (SIREN); Sisters of Charity of the Incarnate Word, Houston; Sisters of St. Dominic of Blauvelt, NY; Sisters of the Most Precious Blood; Social Justice Committee St. Patrick Church; South Asian Network; Southwest Women's Law Center; St. Francis St Vincent de Paul Society; Tennessee Justice Center; Thai Health And Information Service;

The Children's Partnership; The Latino Health Insurance Program, Inc.; Turning

Points; United Way Bay Area; URI Feinstein Center for a Hunger Free America; Vermont Affordable Housing Coalition; Virginia Poverty Law Center; Voices for Vermont's Children; Voz Hispana Cambio Comunitario; Washington Community Action Network; Washington Healthcare Access Alliance; Washington State Labor Council, AFL-CIO; West Chester Food Cupboard; West Side Campaign Against Hunger; Westlake Chinese Culture Association; Wisconsin Council of Churches; Wisconsin Faith Voices for Justice; Women's Action Movement Washtenaw County MI; Worksite Wellness LA; Xaverian Brothers; Young Women United;

Ms. SÁNCHEZ. Mr. Speaker, I reserve the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I yield 5 minutes to the gentleman from Pennsylvania (Mr. BARLETTA), the author of the Verify First Act, and as chairman of the House Ways and Means Committee, I am proud to advance this bill.

Mr. BARLETTA. Mr. Speaker, I thank the gentleman for yielding and working with me on this important issue. I also thank leadership for recognizing this issue and working with me to fix the problem.

I am proud to rise today in support of my bill, H.R. 2581, the Verify First Act.

My bill is intended to stop fraud in the distribution of healthcare tax credits and protect taxpayer dollars. It is simple: the American people expect that we are verifying that someone qualifies for taxpayer money before that money goes out the door.

This is about the Federal Government being good stewards of the money our constituents send to Washington. Every Federal dollar that goes to someone committing fraud is a dollar that is not going to a person who truly needs and deserves assistance.

No one should be allowed to commit fraud at the taxpayers' expense. No business would give a refund without first verifying a receipt.

Yet this is exactly what is happening under our current healthcare system. The law claims that taxpayer money will only go to people who qualify for it. Yet no one is being held responsible for making sure that that happens. My bill does that.

Under current law, the Federal Government pays tax credits to individuals without first verifying that they qualify to receive them. If individuals cannot verify their legal status, the IRS is then forced to chase after the money.

This pay-and-chase model of distributing tax credits has greatly increased costs to the taxpayers. A 2016 Senate report revealed that, under ObamaCare, \$750 million in taxpayer-funded healthcare subsidies went to people who did not qualify for those benefits.

We could fix this problem and save time and money so that IRS agents are helping people, instead of trying to recover improper payments by verifying legal status first.

My bill simply requires the IRS to work with the relevant Federal agencies to verify that an individual is a

citizen, national, or lawfully present in the United States before tax credits go out the door. This can be done by verifying an applicant's Social Security number or other immigration documents. Again, the American people expect that we are already doing this.

Under my bill, everyone who applies for the advance premium tax credit will be verified for legal status. Most people won't even know that this is happening because the verification check is so quick.

My bill also includes protections that ensure that individuals who are legally entitled to these tax credits are not penalized if there is a delay in verifying their documents. I first raised this issue last year with the previous administration. I am raising it again this year because there is no evidence that anything has been done to address it.

Nobody wanted to take responsibility for mismanaging \$750 million of taxpayer money. Everyone pointed fingers at other people. My bill holds people accountable.

While I received assurances from the current administration that it would implement and follow a process to verify legal status, my bill would require it in law. This issue is too important to be left to the changing positions of unelected Federal bureaucrats. The American people deserve to know that their representatives are doing everything in their power to protect taxpayer money.

The Verify First Act provides that certainty and upholds the integrity of the health insurance premium tax credit by putting an end to fraud and abuse.

Mr. Speaker, I thank the cosponsors of my bill for their support. They include DIANE BLACK, MO BROOKS, JEFF DUNCAN, JIMMY DUNCAN, MIKE KELLY, DOUG LAMBORN, MIKE McCAUL, DAVID MCKINLEY, KRISTI NOEM, JIM RENACCI, MIKE ROGERS, LAMAR SMITH, JASON SMITH, G.T. THOMPSON, and JOE WILSON.

Mr. Speaker, I include in the RECORD letters of support from NumbersUSA and FAIR, two groups that have been working with me to protect the interests of the American worker and legal immigrants.

NUMBERSUSA,
Arlington, VA, May 23, 2017.

Hon. LOU BARLETTA,
House of Representatives,
Washington, DC.

DEAR CONGRESSMAN BARLETTA: NumbersUSA, on behalf of our more than 8 million activists, applauds you for introducing the Verify First Act to ensure that health care tax credits are not paid to illegal aliens or other disqualified aliens. As you know, NumbersUSA opposed the ineffective verification provisions in the Affordable Care Act because we knew they would result in taxpayer-funded subsidies being sent to illegal aliens. Our concerns, unfortunately, were confirmed by the Senate Committee on Homeland Security and Governmental Affairs, which reported that more than \$700 million in Obamacare subsidies had been paid to ineligible aliens by 2015. Like you, we recognized that these same ineffective

verification procedures in the American Health Care Act (AHCA) would result in the payment of health care tax credits to illegal or otherwise ineligible aliens.

The Verify First Act will require the Social Security Administration (SSA) and the Department of Homeland Security (DHS) to actually verify the citizenship or immigration status of every applicant for a credit under the AHCA before the Treasury Department issues the credit. Both SSA and DHS have established, proven methods of verifying status in a timely and efficient manner, including the E-Verify system, which relies on data from these two agencies to verify work authorization, and the Systematic Alien Verification for Entitlements (SAVE) system, which uses DHS data to establish welfare eligibility.

Hard-working Americans and legal residents already are struggling to pay for their own health care. There is simply no excuse for the Federal government to force them to subsidize health care for illegal aliens through taxpayer-funded credits.

For this reason, NumbersUSA is delighted to support your Verify First Act and we look forward to working with you to make sure it is enacted into law. We also applaud House Republican Leadership and the House Ways and Means Committee for working with you to close this expensive loophole in our health care system.

Sincerely,

ANNE MANETAS,
Vice President, NumbersUSA.

FEDERATION FOR AMERICAN
IMMIGRATION REFORM,
Washington, DC, May 24, 2017.

Hon. LOU BARLETTA,
Washington, DC.

DEAR CONGRESSMAN BARLETTA: On behalf of the Federation for American Immigration Reform's (FAIR) nearly 1.5 million members and supporters nationwide, I am writing to thank you for introducing the Verify First Act. This important piece of legislation would deny health care tax credits to illegal aliens and ensure that Americans' hard-earned tax dollars only go to those with a valid Social Security number (SSN).

As you know, federal law explicitly prevents illegal aliens from receiving tax credits. Despite this, a recent report by the Senate Homeland Security and Governmental Affairs Committee found that nearly 500,000 illegal aliens received approximately \$750 million in taxpayer-funded health care subsidies as of June 2015. Under Obamacare, the federal government pays health care tax credits on a "temporary basis" to individuals who are unable to verify their citizenship. If an individual is ultimately unable to verify their immigration status, the funding is suspended and the Internal Revenue Service (IRS) attempts to recoup overpayments from the individuals who were wrongly covered. This challenging practice—known as "pay and chase"—is costing taxpayers millions.

As a complement to the recently passed American Health Care Act, your legislation ensures that the IRS has verified that an individual is a citizen, national, or lawfully present in the United States before the advance health insurance premium tax credit is disbursed. This will be done by checking an applicant's SSN or other immigration documents. Additionally, your legislation prohibits the use of the Individual Taxpayer Identification Number (ITIN), which are issued without verification of legal status.

For the aforementioned reasons, FAIR applauds you for introducing the Verify First Act. When this important piece of legislation

is considered on the House floor, FAIR will include the vote in our voting report.

Sincerely,

DAN STEIN,
President.

Mr. BARLETTA. Additionally, this legislation is supported by Citizens Against Government Waste and Americans for Tax Reform.

Finally, I include in the RECORD a Statement of Administration Policy noting that the President would sign this bill into law.

STATEMENT OF ADMINISTRATION POLICY

H.R. 2581—VERIFY FIRST ACT—REP. BARLETTA,
R-PA AND 14 COSPONSORS

The Administration supports H.R. 2581, the Verify First Act. Under Obamacare, millions of dollars in advance payments of the premium tax credit may have been paid on behalf of individuals who were likely ineligible beneficiaries, including illegal immigrants. By eliminating the practice of providing advance payments while an applicant's immigration status is being verified, this bill stems the flow of payments to ineligible individuals under Obamacare and strengthens the ability of the Administration to ensure premium tax credits will be appropriately provided to eligible individuals under the American Health Care Act of 2017 (AHCA). By protecting the integrity of Federal funds, this bill furthers the President's vision of a more efficient Federal Government that respects taxpayer dollars.

H.R. 2581 would prohibit advance payments of premium tax credits to individuals under current law and the AHCA, unless the Secretary of the Treasury receives confirmation that the individual is a citizen or a national of the United States, or is lawfully present in the United States. H.R. 2581 would also strengthen the AHCA, as passed by the House of Representatives on May 4, 2017, which the Administration continues to support strongly.

If H.R. 2581 were presented to the President in its current form, his advisors would recommend that he sign the bill into law.

Mr. BARLETTA. Mr. Speaker, I strongly urge passage of my bill.

Ms. SANCHEZ. Mr. Speaker, I would like to remind the majority that the IRS would be able to do their job if they didn't spend the last 8 years demonizing the IRS and cutting their budget year after year.

Mr. Speaker, I yield such time as he may consume to the gentleman from Michigan (Mr. LEVIN), my colleague on the Ways and Means Committee.

(Mr. LEVIN asked and was given permission to revise and extend his remarks.)

Mr. LEVIN. Mr. Speaker, this act jeopardizes American families' ability to afford health insurance.

The so-called Verify First Act would require a new verification process of an individual's Social Security number before he or she can receive any tax credit for health coverage, either under the ACA or under the disastrous House-passed TrumpCare bill.

This bill does nothing to address the reality that more than 23 million Americans would lose health insurance under the Republican healthcare legislation; nor does it address the harm caused by cutting \$800 billion from Medicaid by eliminating the expansion

for moderate-income workers and by imposing per capita caps on program spending; and it does nothing to address higher premiums for older workers and discrimination against Americans with preexisting conditions that will occur under the TrumpCare bill that this legislation is amending.

Instead, this bill takes that one step further by making it harder for children, including newborns and survivors of domestic violence and sex trafficking, to obtain a tax credit for purchasing their own health coverage. Under the legislation, Social Security numbers would be required before receiving a tax credit, and it prohibits the use of an individual taxpayer identification number, which those without a Social Security number use to file their tax returns.

Mr. Speaker, as has already been said, there are already protections built into the law to ensure that tax credits are issued to qualifying individuals. Under current law, eligibility for tax credits is verified when an individual applies to enroll in coverage. The eligibility is then subject to a secondary verification process that identifies ineligible individuals and terminates their coverage. This system strikes a balance between rigorously verifying eligibility, while also ensuring that eligible individuals are not subject to financial hardship because of red tape.

Mr. Speaker, this bill would make it more difficult for American families to access affordable healthcare. I oppose this bill, and I urge my colleagues to do the same.

Mr. BRADY of Texas. Mr. Speaker, I yield 5 minutes to the gentleman from Pennsylvania (Mr. KELLY), a key member of the Ways and Means Committee.

Mr. KELLY of Pennsylvania. Mr. Speaker, I have a chart that I am going to put up here in a minute, but there is something that I think we all need to realize: Our positions here not only are as representatives but also stewards of taxpayer money.

Now, a lot of people sometimes become confused as to whose money it is that we are talking about, and what we are talking about is hardworking American taxpayers.

The definition of a steward is pretty simple: It is someone who manages another's property or financial affairs; one who administers anything as the agent of another or others.

The oath we take makes us responsible for every single penny that we spend or allocate because it came out of the pocket of a hardworking American taxpayer.

So it just seems to me that Mr. BARLETTA's idea makes sense: this idea that somehow actually making sure that people qualify for a subsidy is somehow being mean-hearted and not being actually a steward of these dollars.

I just wanted to point this out. This is H.R. 3590, the Patient Protection and Affordable Care Act. It was the final

vote on March 21, 2010. And I would just tell some of my colleagues: Take a look because some of your names are very prominent there—and you can see it. The piece that we are talking about is the piece that was included in the Affordable Care Act. This isn't something that we dreamed up overnight; this is something that was actually part of the Affordable Care Act.

And now we are saying: My goodness, we are allowing these subsidies to be out there. And then what we are saying is: Well, we are going to presume that whoever it is who applied for these subsidies actually is entitled to them.

Now, that only works in Washington, D.C. In the private sector, you usually have to verify before you do anything, as opposed to saying: Well, do you know what, somebody said that they were entitled to this, so we ought to just go ahead and pass this on.

I have got to tell you: It is a lot easier when it doesn't come out of your pocket. But, when it comes out of hardworking American taxpayers' pockets, I think it is incumbent upon us, as elected representatives, to say that there is something that doesn't make sense here.

When over half a million people receive over \$750 million in subsidies, somebody, somewhere, should be saying: How did this happen?

I think it is interesting that neither HHS or the IRS has any method in place to actually go out and recoup these dollars that were wrongfully awarded. This just doesn't make sense. Mr. BARLETTA is doing something that is common sense.

And I know that when the act was passed, the most famous quote of all is: We have to pass it to find out what is in it.

Well, we did pass it. I wasn't here. I was in the private sector. But these are all of the folks who passed it. This is actually your policy. This is LOU BARLETTA's policy. This isn't a Republican policy. This is a policy that was part of the Affordable Care Act.

Why in the world would we ever, as taxpayers, expect people to verify this type of activity?

We should just say: Listen, they seem like pretty good folks, and they are going to eventually get back to us.

We have no way of recouping this money.

Now, we can rail about people not having hearts; we can rail about people who don't like immigrants; and we can rail about taking this out on hardworking families and making it difficult for them to get by.

I would just say this: We are trying to protect taxpayer money. We are trying to protect something that is so basic. We are trying to protect something that is actually part of the law that was passed as part of the Affordable Care Act. This isn't a foreign idea. This just makes sense.

So I would just ask my friends: Listen, please go to H.R. 3590, the Patient Protection and Affordable Care Act,

and go to section 1411—this is your language, by the way. As I said, I wasn't here at the time. I did read it, and I am still scratching my head to say: Do you know what, this is probably a good policy; you should probably read it before you pass it.

But it says exactly what it is that you expect people receiving these subsidies to go through.

It is amazing me today that, all of a sudden, this is Potomac amnesia: I don't remember that part of the law.

So, look, there could be nothing more sensible—commonsensical—than making sure that before we issue subsidies, that are funded by hardworking American taxpayers, that we actually verify who it is that is getting them; rather than going ahead and putting it out there and then saying: Do you know what, maybe they don't qualify.

Well, how do you get the money back?

This pay-and-chase idea, to me, would never work in the private sector because we actually have to be responsible for what we do.

Now, I don't want you to get all wrapped around the axle and think that somehow we are coming after people in a way that doesn't make sense.

Here is what I want you to think about: I want you to think about the people who actually pay the tab, the people who actually pick up the check, the people who actually pay taxes, the people to who we are the most responsible.

And to somehow come up with an idea that it is mean-hearted to verify who is getting these subsidies, to me, is tomfoolery. If you want to do something, and you want to make it hard for people to understand what we are doing, do this: I would love to go back home and tell people what you folks just don't understand. You sent the money to us, we decided how we are going to spend it, we decided that we can give it to anybody we want, and, by the way, if they don't qualify, that shouldn't bother you.

Now, let's just do something that makes sense.

□ 1400

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. BRADY of Texas. Mr. Speaker, I yield the gentleman an additional 1 minute.

Mr. KELLY of Pennsylvania. Well, you know what? I really don't need a full minute to talk about something that is common sense, but I have been here now a little bit over 6 years, and it is hard for me to believe that this act was passed back on March 21, 2010, and the language we are talking about today is the actual language that was in the bill that we had to pass before we could find out what was in it.

Maybe at that time somebody should have read this, and it was a good idea to actually verify these things. That would have saved a whole lot of time, a whole lot of money, and a whole lot of irresponsible spending.

Again, whether you want to agree with the study or not agree with the study, when half a million people receive over \$750 million in hardworking American taxpayer money, and then we are told: Geez, I can't believe you are that mean that you want to go back and recoup money from people who didn't deserve it—no. What we are saying is let's verify first. Let's make sure of every single penny that goes out of this House—the people's House, by the way—and let's do what is the responsible thing to do as stewards of every single taxpayer penny.

Ms. SÁNCHEZ. Mr. Speaker, I would just remind my colleagues that under the ACA, there is also a verification process for subsidies. But I would just raise the issue that for newborn children, most of whom don't have a Social Security number when they are newborn—and this includes children of our military members serving overseas—if they have a severe health problem, then delaying verification, which can be up to 6 weeks for them, can mean the difference between life and death. And I am talking about a situation such as that experienced by Jimmy Kimmel, if you take the time to see his response to what happened with his newborn.

With that, Mr. Speaker, I am pleased to yield 4 minutes to the distinguished gentleman from Texas (Mr. DOGGETT), also a member of the Ways and Means Committee.

Mr. DOGGETT. Mr. Speaker, this so-called American Health Care bill is a real Titanic of a sorry piece of legislation: It would sink 23 million Americans losing their health coverage; millions more who have a preexisting condition would face great barriers; it would undermine Medicare; it would provide price-gouging, Big Pharma manufacturers with a huge tax windfall, all as part of almost a trillion dollars in a tax cut—which is what their bill is really all about, not healthcare—those benefits going to a few corporations and the superrich among us.

Most every healthcare professional group in the country along with the AARP and the vast majority of Americans reject this bill. We would have even more people rejecting if it hadn't been hidden, if even one administration official had had the courage to come and be held accountable for this bill in a public hearing. But, apparently, we will not have that anywhere in this Congress before this huge bill is approved.

The American people are locked on board this sinking ship. Our insurance markets are already taking on water from Trump sabotage, and disaster looms in front of us.

This is not a Verify First bill that we take up today; it is a patch on this sinking Titanic ship.

It is not a Verify First; it is a "Vilify First" our immigrants, and it is really just the next chapter in Trump's anti-immigrant crusade, which he tweets about on a regular basis.

Our Republican colleagues celebrate this Immigrant Heritage Month, June. They celebrate the fourth anniversary of 68 Members of the United States Senate, in a bipartisan way, approving comprehensive immigration reform. They do it with this "Vilify First Act."

And while I want to protect taxpayers and think we have a responsibility to ferret out and prevent every dime of fraud that might be out there, I also feel a responsibility to struggling families that I represent who already have so many barriers in the way of getting medical coverage to their children.

Not everyone is as fortunate as Jimmy Kimmel, although he had the misfortune of a child born with serious medical needs, he at least had the ability to do something about it. And folks need to be able to access promptly and immediately, sometimes, a family doctor.

We should fight fraud wherever it occurs. I do wish we had the same level of enthusiasm about protecting taxpayers from Medicaid fraud by big pharmaceutical manufacturers, for offshore tax dodging that denies us billions of dollars, as they voice for taking on the poor. We don't have that, but we do need to analyze carefully what the Government Accountability Office that provides the basis for this legislation really said.

They found a need to address \$750 million. Under the program, they did not find one dollar, one red cent that an immigrant had taken improperly from this program. They did not document any immigrant fraud. There may be some out there, but you can't rely on this study to find it.

We were asked: Well, why do you think this has anything to do with immigrants? Well, I can tell you why. Because the sponsor of the amendment, who is here on the floor, when he introduced this piece of legislation, said he was after what he called illegal immigrants; and he said that he would not vote for TrumpCare, that sorry Titanic of a bill, he would not vote for it unless this provision was adopted.

The SPEAKER pro tempore. The time of the gentleman has expired.

Ms. SÁNCHEZ. I yield the gentleman an additional 1 minute.

Mr. DOGGETT. Mr. Speaker, I personally represent San Antonio, San Marcus, Lockhart, and Austin families that already face barriers to getting their children medical coverage, and adding an additional requirement just means they are that much less likely, in the event of an emergency, to be able to get coverage. We need to prevent fraud. This is not the way to do it.

What we need is comprehensive immigration reform to deal with these immigration issues just like the Senate approved 4 years ago—make improvements on it; debate it; consider it—sink this sorry piece of legislation, try to raise up the antifraud provisions and the comprehensive immigration reform that we so desperately need, and to grow this economy.

Mr. BRADY of Texas. Mr. Speaker, I am proud to yield 2 minutes to the gentleman from Florida (Mr. BILIRAKIS).

Mr. BILIRAKIS. Mr. Speaker, I rise today in support of H.R. 2581, the Verify First Act. This legislation is part of our continued focus on improving the Nation's healthcare system beyond the passage of the American Health Care Act. The bill ensures those who receive help to purchase health insurance are truly eligible. What is wrong with that?

Under the Obama administration, an estimated \$750 million in tax credits have been awarded to over 500,000 individuals who were later determined to be ineligible. For the sake of hardworking Americans everywhere, we need to be better stewards of taxpayer dollars. That means verify first.

Why not? The Verify First Act protects taxpayer dollars from waste, fraud, and abuse under ObamaCare and, in the future, under the American Health Care Act. This bill is good for taxpayers and good for America's healthcare future. It is as simple as that.

Ms. SÁNCHEZ. Mr. Speaker, it is now my pleasure to yield 3 minutes to the gentlewoman from California (Ms. JUDY CHU), a colleague from the Ways and Means Committee.

Ms. JUDY CHU of California. Mr. Speaker, I rise in strong opposition to this misguided bill. This bill will prevent people who have a legitimate right to healthcare from accessing it and will harm them, and it is for reasons that are completely unjustified.

Currently, taxpayers must provide a Social Security number or tax I.D. number in order to qualify for a premium tax credit for healthcare. While the taxpayer's citizenship and immigration status are verified, they are given a 90-day grace period in which to prove their legal status.

This grace period was put into place to ensure that people do not lose critical healthcare coverage and continue to have it while their paperwork is cleared. This bill would remove this safeguard and make it more difficult for numerous people to obtain health insurance. That could be a matter of life or death.

This bill would certainly create barriers for immigrants who are here legally. It would also create barriers for U.S. citizens who have complications with their Social Security numbers. This includes people who recently change their name after marriage, have an error in their records, were born abroad, or were victims of human trafficking. It would also affect newborns, who do not get their Social Security number right away.

Republicans claim that reports released by the GAO and the Senate Homeland Security and Government Affairs Committee were proof of immigrants defrauding the government, but neither of these reports back up this claim.

First of all, the GAO report was actually a test to identify vulnerabilities

for fraud in the system. They did not find instances of immigrants committing fraud for healthcare subsidies. The Senate report found that 500,000 individuals did not complete their verification process and were, thus, deemed ineligible for subsidies.

The author of today's bill takes this information and leaps to the conclusion that all those who did not complete the process were undocumented immigrants and were attempting to commit fraud, but there is nothing in either report to substantiate this. In fact, the ACA requires undocumented immigrants or anybody who does receive subsidies in error to pay back every cent on their tax return at the end of the year.

This bill seeks to address a problem that does not exist. Instead, it would harm people by denying or delaying health insurance subsidies to people who need them. This is wrong. I urge my colleagues to vote "no."

Mr. BRADY of Texas. Mr. Speaker, I am proud to yield 2 minutes to the gentleman from Pennsylvania (Mr. MARINO).

Mr. MARINO. Mr. Speaker, I rise today in support of H.R. 2581, the Verify First Act, which was introduced by my colleague, good friend, and fellow Pennsylvanian LOU BARLETTA. This is a simple piece of legislation that ensures no American taxpayer dollars are used to fund healthcare for those who are here undocumented.

Congress, the American people, and my constituents were told that, under ObamaCare, illegal immigrants would not be eligible for tax credits. Instead, the Senate Homeland Security and Government Affairs Committee issued a report detailing that, as of June 2015, over half a million people without legal status have received up to \$750 million in taxpayer-funded subsidies. No record can be found if any of this was ever recovered.

It is time that we ensure our taxpayers that their dollars are only going to those with legal status. I urge my colleagues to vote "yes" on this legislation.

Ms. SÁNCHEZ. Mr. Speaker, I am pleased at this time to yield 3 minutes to the gentleman from Oregon (Mr. BLUMENAUER), my colleague on the Ways and Means Committee.

Mr. BLUMENAUER. Mr. Speaker, it is always a privilege to share the Chamber with my fellow Northwesterner.

We have gone through this in the Ways and Means Committee with one of the least productive hearings I can remember, and that says a lot in my 10 years on the committee. We do it good natured, but, frankly, it is beside the point. And my friends from the Ways and Means Committee have documented the fact that this is a solution in search of a problem.

The real outrage ought to be what is happening now behind closed doors to take a flawed bill that came from the House, was actually made worse in

order to get the votes for it, and passed through on a narrow party-line vote—actually, a number of Republicans voted against it—lodged in the Senate, no public hearings. In fact, we are told that they are not enabling people to actually get ahold of the documents to know what is going on.

You know, it is stunning to me to have heard some of my Republican friends complain about the process of the Affordable Care Act. I was in the middle of that. We took a year. Three committees in the House had multiple hearings, work sessions. There were actually some Republican amendments adopted out in the open. CBO scored the bill so people knew. Now we are on the verge of, we are told, having that sneak through the Senate without the glare of publicity, without an open public process, which will deny healthcare to millions of people—millions of people—and shred much of the good work that has been done through the Affordable Care Act.

□ 1415

We have been told and we acknowledge there are little things that we could do to fine-tune it, but in 7 years of Republican crow and crow, we have never had an opportunity to do that. Instead, this administration and my Republican friends consistently made it worse, destabilized, sent conflicting signals to the healthcare industry, to the insurance companies. And you don't have to take my word for it. News accounts quote people in the industry about what the Republicans have done to destabilize it and try to make it fail.

There was a reason that virtually everybody in the healthcare space was opposed to the Republican approach. It is not thoughtful. It is not fair. It is not effective. It is not necessary. But today we are looking at some provisions that will make it a little more burdensome.

The SPEAKER pro tempore (Mr. SIMPSON). The time of the gentleman has expired.

Ms. SÁNCHEZ. Mr. Speaker, I yield an additional 2 minutes to the gentleman from Oregon.

Mr. BLUMENAUER. Mr. Speaker, there may be some people that will be swept up who had gotten care that they didn't, but there will be people who will be swept up who were entitled to care who could not jump through the hurdles or, at a minimum, had their care delayed. We haven't properly analyzed that. But as I say, it is beside the point.

There are tremendous opportunities for us to work together on a bipartisan agenda that we have in the Ways and Means Committee, of things that we could move forward and agree upon to make healthcare better, that doesn't depend on shredding the guarantees of the ACA; that doesn't depend on gutting Medicaid, which more Americans rely upon for their healthcare than any other program in the country. We wouldn't have to mess with that.

Instead, we are having a sideshow. I don't know that it goes anywhere, but it certainly isn't the issue that Americans could focus on, should focus on, that is going to imperil their healthcare for tens of millions of Americans if the Republicans have their way.

That is exactly why we are debating this today, to deflect attention, occupy time, and prevent doing the job that we should have done right here, and allow the Senate to be able to continue this unfortunate process.

Mr. BRADY of Texas. Mr. Speaker, I am proud to yield 3 minutes to the gentleman from Ohio (Mr. RENACCI), a colleague of mine on the Ways and Means Committee.

Mr. RENACCI. Mr. Speaker, I rise today in support of H.R. 2581, the Verify First Act, introduced by my good friend and colleague, Congressman LOU BARLETTA. This legislation seeks to remedy one of the many oversights of the ACA that it failed to address—an oversight at the expense of the American taxpayer.

Under the current system, the Treasury disburses credits to individuals before their application has been verified. In the real world, where I come from, that just doesn't happen. If the IRS then finds out that this individual is not eligible, they have to try to get the money back. It is almost impossible to recover that money.

This legislation closes a loophole simply by requiring an individual be verified as lawfully present before the Treasury releases the money. It is important to understand that the issue at hand is about poor stewardship of hard-earned tax dollars. That is what the American people sent us down here for. The sole intent of this credit was for the credits to be used lawfully, and this legislation helps ensure just that.

At a time when our national debt is \$19 trillion and counting, it makes no sense for the Federal Government to continue to write these checks. My constituents in Ohio depend on me to ensure responsible stewardship of their hard-earned tax dollars.

Mr. Speaker, I urge my colleagues to commit to the same responsibility and support the Verify First Act.

Ms. SÁNCHEZ. Mr. Speaker, I yield myself such time as I may consume.

My colleagues on the other side of the aisle are calling this bill and the two other healthcare bills on the floor this week "fixes" for TrumpCare. But what exactly is it that you are fixing?

This bill does nothing to address the more than 23 million individuals who will lose their coverage or the \$800 billion cut to Medicaid under TrumpCare. Nothing in this bill will do anything to fix the waiver allowing insurers to discriminate against individuals with pre-existing conditions by jacking up their rates, and nothing in this bill will do anything to roll back the massive tax cut that they are handing out to the top 400 households in America.

Instead of addressing the real issues with our healthcare system, you bring

a racist bill to the floor that you use to buy a vote, literally, for your TrumpCare bill.

Mr. BRADY of Texas. Mr. Speaker, the rules of the House are very clear about imputing the character of lawmakers, and I would warn the gentleman, she is treading on the rules.

The SPEAKER pro tempore. Is the gentleman attempting to raise a parliamentary inquiry?

Mr. BRADY of Texas. I am considering.

The SPEAKER pro tempore. The gentleman from California has the time.

Mr. BRADY of Texas. I will monitor the remainder of the remarks.

Ms. SANCHEZ. Mr. Speaker, I was addressing a racist piece of legislation that was used to buy a vote for the TrumpCare bill. But the problem is that this bill doesn't do anything that it says it does. It is based on a blatantly partisan Senate report that doesn't even say what my colleagues on the other side of the aisle claim that it says.

It is baffling how many of my Republican colleagues believe that this report that they keep citing actually said anything about undocumented immigrants. Did you "read" this report in the same way that you "read" the AHCA and all of its amendments?

If you actually read the report, you would know that it does not state that these individuals were undocumented immigrants, but only that they did not complete the verification process. The hurdles might have been too big, it might have taken too much time or too much effort, and they dropped out of the verification process without completing it.

The report also doesn't say that hundreds of thousands of undocumented immigrants enrolled and received premium credits. The report states that "as of September 30, 2015, CMS awarded approximately \$750 million in advance premium tax credits to individuals enrolled through healthcare.gov who CMS later determined to be ineligible."

It is funny that the daughter of Mexican American immigrants is able to read and understand the distinctions made in this report better than some of my native-born colleagues can.

Mr. Speaker, I want to close by begging my Republican colleagues to prove to me that this bill isn't about shutting out immigrants from access to care: legal immigrants or children of those born overseas to our military or newborn children or victims of domestic violence or victims of human trafficking.

Prove to me that you care about the health and wellbeing of all Americans, regardless of the color of their skin or their economic circumstances.

I am actually in agreement with you that ineligible individuals should not see a single penny of the subsidies provided by both the ACA and the AHCA, but there are protections already in

place where only citizens and people lawfully present in the United States can enroll in marketplace coverage and get subsidies to help them pay their premiums and cost-sharing charges.

This bill doesn't fix anything. It just seeks to further demonize immigrants as criminals and people with my last name out of the healthcare system.

Instead of wasting our time on a bill that is in search of a problem to solve, a problem that doesn't even exist, let's work together to make sure that other Americans are not caught up in the unintended consequences of this bill and aren't denied coverage when they are actually eligible for those subsidies and that coverage.

Let's actually work on a better way for the American people.

Mr. Speaker, I yield back the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I yield myself such time as I may consume.

Let's make sure we fact-check some things here. Nothing in this bill changes the eligibility of the Affordable Care Act and who is eligible for it. In fact, the Republican healthcare bill that passed the House, according to the American Action Network, there will be roughly 5.3 million more Americans that will be eligible for help for their healthcare under the Republican plan than under the Affordable Care Act.

Let's fact-check a couple of other issues. We are told that this has all come about because the IRS has not funded properly, but I would remind our Democrat colleagues that the majority of our Democrat colleagues supported the spending levels, which President Obama signed into law regarding the Internal Revenue Service.

Secondly, they have raised the issue that there are no Social Security numbers available. But in truth, nearly 96 percent of children born in America receive their Social Security numbers within 2 weeks. There is an expedited process going forward to achieve the others as well.

We are told, listening today: there is no fraud in ObamaCare; there is no need for this bill by Mr. BARLETTA.

But I remind our colleagues that twice the Government Accountability Office looked at eligibility within the Affordable Care Act. In 2014, they used fake identities to see if they could obtain ObamaCare coverage on the exchange, and in 11 out of 12 applications—some with no data at all—the GAO was granted subsidies for people who don't even exist.

So you say: Well, that is 2014. Certainly, things got better.

Well, last year, they ran it again in the special enrollment period, and in this test, the GAO was able to obtain coverage for imaginary people in 9 out of 12 cases.

We are told today that our taxpayer dollars aren't being wasted. Well, the American public knows better, and they know this because we have

worked for 7 years to oppose what we knew would be a failing law. We held more than 200 congressional hearings. We had 65-plus hours of open debate on the American Health Care Act, and 37 bills passed the House that were ultimately, in one form or another, included in the Republican bill.

The bottom line is this, Mr. Speaker: Our Democrat friends are in denial. ObamaCare is collapsing. Prices have more than doubled. They haven't gone down. They have more than doubled for most Americans; in some States more than tripled, and those rates aren't going down. They are skyrocketing. People aren't getting more choices of healthcare plans. They are disappearing.

Texas has seen nine insurers abandon our State—I think more than any other State—and it is getting fewer and fewer. It is occurring across the country.

You are not able to see more local doctors and go to more local hospitals; just the opposite. It is fewer, and that is hurting everyone in America. ObamaCare is a sinking ship, and it is taking some very good Americans down with it.

The question is: Do we begin to give people a lifeline to truly affordable care?

With this bill, Mr. BARLETTA insists in a commonsense way that your tax dollars go to those we are trying to help: those who can't get healthcare at work; those who don't get it through government programs like Medicare or the VA; those small-business people; those folks coming out of college; those entrepreneurs who are at home starting a new business or raising their families; even those early retirees. Those are the people we are trying to help, and every dollar counts.

Mr. BARLETTA's bill, which I am proud as chairman of the Ways and Means Committee to bring to you, makes a commonsense requirement: that you be verified to get those subsidies before you receive them; to make sure those precious dollars actually go to the Americans we are trying to help.

I strongly support the Verify First Act. If you stand for stopping waste, and fraud, and abuse in protection of your tax dollars, I would urge your support for this bill.

Mr. Speaker, I yield back the balance of my time.

Mr. BABIN. Mr. Speaker, I rise in support of H.R. 2581, the Verify First Act, which will put important safeguards in place to ensure that federal tax dollars are not fraudulently used to pay for illegal immigrants to enroll in Obamacare.

Right now, the federal government provides Obamacare premium tax credits to individuals before fully making sure that these individuals rightfully qualify for these benefits.

For example, the federal government has wrongfully issued hundreds of millions of dollars in tax credits to individuals without first verifying their immigration status. After the money goes out the door, the Internal Revenue Service must attempt to track down these individuals to recoup the money.

Last year the Senate Committee on Homeland Security and Government Affairs reported that more than \$750 million in taxpayer dollars went to 500,000 people who did not meet the qualifications for those benefits.

H.R. 2581 addresses this issue by requiring that the Social Security Administration, the Department of Homeland Security and the Department of Health and Human Services to certify that an individual is a citizen, national, or legal immigrant before they receive a health care tax credit.

Given that our nation is nearly \$20 trillion in debt, we cannot afford to hand out hundreds of millions of dollars in Obamacare tax credits to individuals who do not qualify.

This bill is a common-sense measure that puts the interests of hardworking taxpayers first and ensures that health care dollars will be directed only at those who are eligible.

I hope that the Senate will soon take up and pass this commonsense bill.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 378, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

□ 1430

MOTION TO RECOMMIT

Ms. SÁNCHEZ. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. Is the gentlewoman opposed to the bill?

Ms. SÁNCHEZ. I am opposed to the bill.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Ms. Sánchez moves to recommit the bill H.R. 2581 to the Committee on Ways and Means with instructions to report the same back to the House forthwith with the following amendment:

Page 4, line 5, insert after the first period the following: "The preceding sentence shall not apply in the case of a delay in verification of such status of an individual who has not attained the age of 1."

Page 5, line 4, insert after the first period the following: "The preceding sentence shall not apply in the case of a delay in verification of such status of an individual who has not attained the age of 1."

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from California is recognized for 5 minutes in support of her motion.

Ms. SÁNCHEZ. Mr. Speaker, this is the final amendment to the bill, which will not kill the bill.

If adopted, the Verify First Act will proceed to final passage as amended.

The Democratic motion to recommit simply amends the Verify First Act to ensure that our most vulnerable—newborns and infants—do not experience a delay in health coverage.

We know that the citizenship of newborns can't be verified electroni-

cally because they don't have Social Security numbers yet when they are born. In order to verify their child's status, parents have to send a copy of their child's birth certificate, which can take anywhere from 1 to 6 weeks to obtain, depending on the State, and that is the best-case scenario if the parents throw a perfect game in documenting and planning for the arrival of their newborn. Just like any perfect game, a little luck is involved in that.

That luck includes having the Social Security Administration process your child's Social Security number as soon as they receive it, that the Administration doesn't make a mistake in the spelling of your child's name, and that you have the financial resources and education to know exactly what steps you need to take to ensure that your newborn has coverage the moment they come out of your womb.

When most people are anticipating the birth of a child, that is not what they are thinking about. The birth of a child is one of life's most precious moments. The joy you feel when you hold your child for the first time should be the only feeling going through your mind. Filling the paperwork out to ensure that your child is covered shouldn't even be something that you should have to worry about.

But the Verify First Act, as currently drafted, would give you another thing to worry about and add an unnecessary barrier for newborns to receive the care they need. God forbid if your child needs extra care after they are born but doesn't have coverage because your plan is waiting to verify your child's status.

A child's life should not hang in the balance because of paperwork and red tape. For all the claims that Republicans are the pro-life party, they sure know how to make life difficult for a newborn as soon as they are out of the womb. They claim to protect the lives of the unborn and crusade against life-saving institutions such as Planned Parenthood. But where are their morals and love of life after the child is born? It somehow magically disappears, and they will throw every obstacle up to ensure that newborns don't receive the care that they need and that they are entitled to.

Whether it is through the unintended consequences of a poorly drafted bill such as this one, or gutting the program that covers half the births in the U.S., Republicans will do everything to gut access to care or place obstacles in struggling people's paths. That's right, by cutting over \$800 billion out of Medicaid, Republicans are endangering the health and welfare of all newborn children.

Earlier I asked my Republican colleagues to prove to me that they care about the health and well-being of all Americans regardless of the color of their skin or their economic circumstances. Well, I am asking them

now to prove to me that they care about the well-being of newborn children.

Mr. Speaker, I urge my colleagues to vote for the Democratic motion to recommit, and let us write a bill that will actually help all U.S. citizens get the coverage that they need and are entitled to.

Mr. Speaker, I yield back the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I rise in opposition to the motion to recommit.

The SPEAKER pro tempore. The gentleman is recognized for 5 minutes.

Mr. BRADY of Texas. Mr. Speaker, this isn't about verifying for infants. Ninety-six percent of children receive their Social Security numbers within 2 weeks after they are born in a hospital, and many of them have parents who are eligible for these credits as well, so it is immediate care. Even without all that, they can achieve and receive healthcare immediately as they process the premium support.

In the American Health Care Act that passed the House, there are more than \$1 billion set aside to help further the verification process to make sure that we are providing timely credits—but for those who are eligible. In truth, our friends across the aisle want to detract from the challenge today, which is that ObamaCare is a sinking ship.

Today's bill is about the taxpayers. Congress has to do all in its power to ensure the money taken from hardworking taxpayers is actually used for programs that improve their lives in this country and are not frittered away on fraud and abuse.

That is why this bill is so critical. It doesn't change eligibility. It simply says that we are not going to pay first and chase later, which always is a losing approach for taxpayers. Not a dollar of taxpayer money should go out the door until citizenship or legal status is verified, period.

Mr. Speaker, I urge my colleagues to defeat the Democrats' motion to recommit and stand on behalf of taxpayers who want those dollars to go to Americans we are truly trying to help for the first time get truly affordable healthcare.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to recommit.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the yeas appeared to have it.

Ms. SÁNCHEZ. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

DEPARTMENT OF VETERANS AFFAIRS ACCOUNTABILITY AND WHISTLEBLOWER PROTECTION ACT OF 2017

GENERAL LEAVE

Mr. ROE of Tennessee. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on S. 1094.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Tennessee?

There was no objection.

Mr. ROE of Tennessee. Mr. Speaker, pursuant to House Resolution 378, I call up the bill (S. 1094) to amend title 38, United States Code, to improve the accountability of employees of the Department of Veterans Affairs, and for other purposes, and ask for its immediate consideration.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Pursuant to House Resolution 378, the bill is considered read.

The text of the bill is as follows:

S. 1094

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Department of Veterans Affairs Accountability and Whistleblower Protection Act of 2017”.

(b) **TABLE OF CONTENTS.**—The table of contents for this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—OFFICE OF ACCOUNTABILITY AND WHISTLEBLOWER PROTECTION

Sec. 101. Establishment of Office of Accountability and Whistleblower Protection.

Sec. 102. Protection of whistleblowers in Department of Veterans Affairs.

Sec. 103. Report on methods used to investigate employees of Department of Veterans Affairs.

TITLE II—ACCOUNTABILITY OF SENIOR EXECUTIVES, SUPERVISORS, AND OTHER EMPLOYEES

Sec. 201. Improved authorities of Secretary of Veterans Affairs to improve accountability of senior executives.

Sec. 202. Improved authorities of Secretary of Veterans Affairs to improve accountability of employees.

Sec. 203. Reduction of benefits for Department of Veterans Affairs employees convicted of certain crimes.

Sec. 204. Authority to recoup bonuses or awards paid to employees of Department of Veterans Affairs.

Sec. 205. Authority to recoup relocation expenses paid to or on behalf of employees of Department of Veterans Affairs.

Sec. 206. Time period for response to notice of adverse actions against supervisory employees who commit prohibited personnel actions.

Sec. 207. Direct hiring authority for medical center directors and VISN directors.

Sec. 208. Time periods for review of adverse actions with respect to certain employees.

Sec. 209. Improvement of training for supervisors.

Sec. 210. Assessment and report on effect on senior executives at Department of Veterans Affairs.

Sec. 211. Measurement of Department of Veterans Affairs disciplinary process outcomes and effectiveness.

TITLE I—OFFICE OF ACCOUNTABILITY AND WHISTLEBLOWER PROTECTION

SEC. 101. ESTABLISHMENT OF OFFICE OF ACCOUNTABILITY AND WHISTLEBLOWER PROTECTION.

(a) **IN GENERAL.**—Chapter 3 of title 38, United States Code, is amended by adding at the end the following new section:

“§ 323. Office of Accountability and Whistleblower Protection

“(a) **ESTABLISHMENT.**—There is established in the Department an office to be known as the ‘Office of Accountability and Whistleblower Protection’ (in this section referred to as the ‘Office’).

“(b) **HEAD OF OFFICE.**—(1) The head of the Office shall be responsible for the functions of the Office and shall be appointed by the President pursuant to section 308(a) of this title.

“(2) The head of the Office shall be known as the ‘Assistant Secretary for Accountability and Whistleblower Protection’.

“(3) The Assistant Secretary shall report directly to the Secretary on all matters relating to the Office.

“(4) Notwithstanding section 308(b) of this title, the Secretary may only assign to the Assistant Secretary responsibilities relating to the functions of the Office set forth in subsection (c).

“(c) **FUNCTIONS.**—(1) The functions of the Office are as follows:

“(A) Advising the Secretary on all matters of the Department relating to accountability, including accountability of employees of the Department, retaliation against whistleblowers, and such matters as the Secretary considers similar and affect public trust in the Department.

“(B) Issuing reports and providing recommendations related to the duties described in subparagraph (A).

“(C) Receiving whistleblower disclosures.

“(D) Referring whistleblower disclosures received under subparagraph (C) for investigation to the Office of the Medical Inspector, the Office of Inspector General, or other investigative entity, as appropriate, if the Assistant Secretary has reason to believe the whistleblower disclosure is evidence of a violation of a provision of law, mismanagement, gross waste of funds, abuse of authority, or a substantial and specific danger to public health or safety.

“(E) Receiving and referring disclosures from the Special Counsel for investigation to the Medical Inspector of the Department, the Inspector General of the Department, or such other person with investigatory authority, as the Assistant Secretary considers appropriate.

“(F) Recording, tracking, reviewing, and confirming implementation of recommendations from audits and investigations carried out by the Inspector General of the Department, the Medical Inspector of the Department, the Special Counsel, and the Comptroller General of the United States, including the imposition of disciplinary actions and other corrective actions contained in such recommendations.

“(G) Analyzing data from the Office and the Office of Inspector General telephone hotlines, other whistleblower disclosures, disaggregated by facility and area of health care if appropriate, and relevant audits and investigations to identify trends and issue reports to the Secretary based on analysis conducted under this subparagraph.

“(H) Receiving, reviewing, and investigating allegations of misconduct, retaliation, or poor performance involving—

“(i) an individual in a senior executive position (as defined in section 713(d) of this title) in the Department;

“(ii) an individual employed in a confidential, policy-making, policy-determining, or policy-advocating position in the Department; or

“(iii) a supervisory employee, if the allegation involves retaliation against an employee for making a whistleblower disclosure.

“(I) Making such recommendations to the Secretary for disciplinary action as the Assistant Secretary considers appropriate after substantiating any allegation of misconduct or poor performance pursuant to an investigation carried out as described in subparagraph (F) or (H).

“(2) In carrying out the functions of the Office, the Assistant Secretary shall ensure that the Office maintains a toll-free telephone number and Internet website to receive anonymous whistleblower disclosures.

“(3) In any case in which the Assistant Secretary receives a whistleblower disclosure from an employee of the Department under paragraph (1)(C), the Assistant Secretary may not disclose the identity of the employee without the consent of the employee, except in accordance with the provisions of section 552a of title 5, or as required by any other applicable provision of Federal law.

“(d) **STAFF AND RESOURCES.**—The Secretary shall ensure that the Assistant Secretary has such staff, resources, and access to information as may be necessary to carry out the functions of the Office.

“(e) **RELATION TO OFFICE OF GENERAL COUNSEL.**—The Office shall not be established as an element of the Office of the General Counsel and the Assistant Secretary may not report to the General Counsel.

“(f) **REPORTS.**—(1)(A) Not later than June 30 of each calendar year, beginning with June 30, 2017, the Assistant Secretary shall submit to the Committee on Veterans’ Affairs of the Senate and the Committee on Veterans’ Affairs of the House of Representatives a report on the activities of the Office during the calendar year in which the report is submitted.

“(B) Each report submitted under subparagraph (A) shall include, for the period covered by the report, the following:

“(i) A full and substantive analysis of the activities of the Office, including such statistical information as the Assistant Secretary considers appropriate.

“(ii) Identification of any issues reported to the Secretary under subsection (c)(1)(G), including such data as the Assistant Secretary considers relevant to such issues and any trends the Assistant Secretary may have identified with respect to such issues.

“(iii) Identification of such concerns as the Assistant Secretary may have regarding the size, staffing, and resources of the Office and such recommendations as the Assistant Secretary may have for legislative or administrative action to address such concerns.

“(iv) Such recommendations as the Assistant Secretary may have for legislative or administrative action to improve—

“(I) the process by which concerns are reported to the Office; and

“(II) the protection of whistleblowers within the Department.

“(v) Such other matters as the Assistant Secretary considers appropriate regarding the functions of the Office or other matters relating to the Office.

“(2) If the Secretary receives a recommendation for disciplinary action under subsection (c)(1)(I) and does not take or initiate the recommended disciplinary action